PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or Fax (871)-273-2885

ere as for

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I though 5 should be completed where appropriate. All finder correspondence including the Patent, advance orders and notification or ministenance fees will be mailed to the current correspondence address as ministenance manufactured to the current correspondence address; and/or (b) indicating a separate "FEE ADDRESS" formal materianear fees unfortification.											
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Feets-Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
38878	7590 08/12	/2009									
F5 Networks, Inc. c/o DARBY & DARBY P.C. P.O. BOX 770 Church Street Station						Certificate of Mailing or Transmission I hereby certify that this PeSoy Transmittal is being deposited with the United States Postal Service with suffiched postage for first class mail in an envelope addressed to the Mail Stop ISSUE SEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
NEW YORK, NY 10008-0770						(Depositor's name)					
						Via EFS (Signature)					
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT								
09/574,738 05/17/2000 Igor Plotnikov 08204/0207446-US0/10.095 9251										251	
TITLE OF INVENTION: METHOD AND APPARATUS FOR ACCESSING A COMPUTER BEHIND A FIREWALL											
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE I		E PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	D.	ATE DUE	
nonprovisional	NO	\$1510		\$0		\$0		\$1510	11	/12/2009	
EXAMINER			ART UNIT CLASS-SUBCLA		s	_					
KANE, CO	726-012000										
Change of correspondence address or indication of "Fee Address" (37 CFR 1.50). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the platent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm thaving as a member a registered storacy or agent) and the names of up to listed, so name will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)											
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.											
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
F5 Networks, Inc. Seattle, Washington											
Reel/Frame: 019907/0096 Please check the appropriate assignce category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government											
4a. The following fee(s) Issue Fee Publication Fee (N	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by rends it card. Form PTO-2038 is attached. The Director is hereby subtorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (3.4—2.10-()-cleacless-as-enter-copy of-fails form).										
5. Change in Entity Status (from status indicated above)											
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).											
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party interest as shown by the records of the United States Patent and Trademark Office.											
Authorized Signature	Mt m	U	<u>k</u>			DateN	ove	mber 11, 2	009		
Typed or printed nam			Tobias			Registration I					
This collection of inform an application. Confiden submitting the complete	ation is required by 37 tiality is governed by 33 d application form to the	U.S.C U.S.C USP1	11. The information of the control o	on is required to obtai 1.14. This collection depending upon the	is in	or retain a benefit by estimated to take 12 dividual case. Any	the pub minute ommen	dic which is to file (an s to complete, includi ts on the amount of ti	d by the US ng gathering me you req	PTO to process s, preparing, and uire to complete	

ss) and lete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.